Fill in this information to identify your	case:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is

### Official Form 101

Part 1:

**Identify Yourself** 

# **Voluntary Petition for Individuals Filing for Bankruptcy**

OR

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your **Tammie** government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). Graham Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you **Tammie** have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or Harris maiden names. Last Name Last Name Only the last 4 digits of xxx - xx - 8 6 5 6xxx - xx your Social Security number or federal

OR

9xx - xx - \_\_\_\_ \_\_\_

(ITIN)

**Individual Taxpayer** Identification number

Debtor 1		Tammie Graham		Case number (if known)		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
and Em			☐ I have not used any business names or EII	Ns.		
		cation Numbers ou have used in	Business name	Business name		
Include		trade names and	Business name	Business name		
		usiness as names	Business name	Business name		
			8 1 - 5 5 2 1 1 0 7	EIN		
				EIN		
5.	Where	you live		If Debtor 2 lives at a different address:		
			614 Dover Heights Trail  Number Street	Number Street		
			Mansfield TX 76063			
			City State ZIP Code	City State ZIP Code		
			Tarrant County	County		
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
			Number Street	Number Street		
			P.O. Box	P.O. Box		
			City State ZIP Code	City State ZIP Code		
6.		u are choosing	Check one:	Check one:		
	bankru	trict to file for ptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2:	Tell the Court Ab	oout Your Bankruptcy Case			
7.	Bankru	apter of the ptcy Code you	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top of	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
	are cho under	osing to file	Chapter 7			
			Chapter 11			
			Chapter 12			
			☐ Chapter 13			

Deb	tor 1 Tammie Graham		Case number (if known)				
8.	How you will pay the fee	coui pay	rt for more details about how you	may pay. Typically, if you aroney order. If your attorney is	with the clerk's office in your local e paying the fee yourself, you may something your payment on your e-printed address.		
			ed to pay the fee in installment viduals to Pay The Filing Fee in I		sign and attach the Application for 3A).		
		By la than fee i	150% of the official poverty line	red to, waive your fee, and mathematical that applies to your family size option, you must fill out the	ay do so only if your income is less ze and you are unable to pay the e Application to Have the Chapter 7		
9.	Have you filed for	<b>☑</b> No					
	bankruptcy within the last 8 years?	☐ Yes					
		District _		When	Case number		
		District		MM / DD / Y			
		District _		when MM / DD / Y	Case number		
		District _		When MM/DD/Y	Case number		
10.	Are any bankruptcy	<b>√</b> No		WWW.7 DD 7 T			
	cases pending or being filed by a spouse who is	☐ Yes					
	not filing this case with	Debtor		Relat	ionship to you		
	you, or by a business partner, or by an	-			Case number,		
	affiliate?				YYY if known		
		Debtor _		Relat	ionship to you		
		District _			Case number,		
				MM / DD / Y	YYY if known		
11.	Do you rent your	☑ No.	Go to line 12.				
	residence?	☐ Yes	. Has your landlord obtained an	eviction judgment against yo	ou?		
			No. Go to line 12.	mont About on Ediction Late	ment Against Vou (Farm 404A)		
			and file it as part of this b	-	ment Against You (Form 101A)		

Deb	otor 1	Tammie Graham			Case number	(if known) _		
Ρ	art 3:	Report About Ar	ny Bu	sine	sses You Own as a Sole Proprietor			
12.	-	u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of business			
		proprietorship is a			Mentoring Group  Name of business, if any			
	individi separa	es you operate as an ual, and is not a te legal entity such as pration, partnership, or			614 Dover Heights Trail  Number Street			
					Mansfield	TX	7606	
	-	nave more than one oprietorship, use a			City	TX State	ZIP Co	ode
	separa	te sheet and attach it			Check the appropriate box to describe your business	:		
	to this petition.				Health Care Business (as defined in 11 U.S.C. § Single Asset Real Estate (as defined in 11 U.S.C. § Stockbroker (as defined in 11 U.S.C. § 101(53A) Commodity Broker (as defined in 11 U.S.C. § 10 None of the above	C. § 101(51)	B))	
13.	Are yo Chapte Bankru are you	can mos	set ap	filing under Chapter 11, the court must know whether yopropriate deadlines. If you indicate that you are a smant balance sheet, statement of operations, cash-flow stif these documents do not exist, follow the procedure in	ıll business atement, ar	debtor, you nd federal in	must attach your come tax return	
	aeptor	debtor?	$\checkmark$	No.	I am not filing under Chapter 11.			
		For a definition of small business debtor, see		No.	I am filing under Chapter 11, but I am NOT a small but the Bankruptcy Code.	ısiness deb	tor accordir	ng to the definition in
	11 U.S	.C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small busines Bankruptcy Code.	ss debtor ac	cording to t	he definition in the
Р	art 4:	Report If You Ov	vn or	Hav	e Any Hazardous Property or Any Propert	y That Ne	eds Imm	nediate Attention
14.	proper alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable		No Yes.	What is the hazard?			
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention is needed, why is it needed?			
	perisha livesto a build	ample, do you own able goods, or ck that must be fed, or ing that needs urgent			Where is the property? Number Street			
	repairs	?			City		State	ZIP Code

Debtor 1 **Tammie Graham** Case number (if known)

## Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one: I received a briefing from an approved credit

About Debtor 1:

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am not requii	ea to rece	eive a briefing	g about
credit counsel	ing becau	se of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

 □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

### ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1		Tammie Graham	Case number (if known)						
P	art 6:	Answer These Q	uesti	ons fo	r Reporting I	Purpos	es		
16.	What ki have?	nd of debts do you	16a.	as "in	_	vidual pr b.	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	mone	y for a business on the second of the second	or investi 6c. 7.	ness debts? Business deb ment or through the operation to that are not consumer or bu	of th	
			100.		the type of debts	you owe	that are not consumer or bu	311103	3 debis.
17.	17. Are you filing under Chapter 7?			No. I	am not filing und	der Chap	ter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	V	8	•	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do imate that you		1-49 50-99 100-199 200-999			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to h?		\$100,00	000 I-\$100,000 01-\$500,000 01-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you e your liabilities to		\$100,00	000 I-\$100,000 01-\$500,000 01-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Debtor 1	Tammie Graham		Case number (if known)				
Part 7:	Sign Below						
For you		I have examined this petition, and I decl and correct.	are under penalty of perjury that the information provided is true				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose proceed under Chapter 7.					
		, .	ot pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		•	concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.				
		X /s/ Tammie Graham	x				
		Tammie Graham, Debtor 1	Signature of Debtor 2				
		Executed on 03/07/2019	Executed on				

MM / DD / YYYY

MM / DD / YYYY

Debtor 1	Tammie Graham			Case number (if know	wn)
represent	not represented by ey, you do not need	eligibility to proceed relief available und the debtor(s) the n	e informed the debtor(s) about ates Code, and have explained the so certify that I have delivered to a which § 707(b)(4)(D) applies, he schedules filed with the petition		
		X /s/ Dwain Do Signature of At	owning ttorney for Debtor	Date	e 03/07/2019 MM / DD / YYYY
		Firm Name 1178 W. Pior	of Dwain Downing		
		Arlington		TX	76015
		City		State	ZIP Code
		Contact phone	(817) 860-5685	Email address <b>dowr</b>	ningoffice@aol.com
		06086550		TX	<u> </u>
		Bar number		State	

Fill in this inf	ormation to ident	ify your case	and this filing:		
Debtor 1	Tammie First Name	Middle Name	Graham		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN D	ISTRICT OF TEXAS		
Case number (if known)				<u> </u>	if this is an led filing
Official Form	106A/B				
Schedule A	/B: Property				12/15
Part 1: De:  1. Do you own on the second of	On the top of any acseribe Each Residence or have any legal or e	dditional pages,	ing correct information. If more write your name and case nur name, Land, or Other Real E	mber (if known). Answer eve	ry question.
1.1. 614 Dover Heigl Street address, if availa	hts Trail able, or other description	Check all	ne property? that apply. e-family home x or multi-unit building	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the	ims on Schedule D: s Secured by Property.  Current value of the
Mansfield	TX 76063	Manu	ominium or cooperative factured or mobile home	entire property? \$290,000.00	portion you own? \$290,000.00
Tarrant	State ZIP Code			Describe the nature of yo interest (such as fee simple entireties, or a life estate)	ole, tenancy by the
County		Who has	an interest in the property?	Home	
76063 Legal Description DOVER HEIGHT Lot 8	hts Trl, Mansfield, T on: 'S ADDITION, Block ant County, Texas	Check one Debto		Check if this is comm (see instructions)	nunity property
	•		ormation you wish to add aboud aboud aboud aboud a side at a	ut this item, such as local	_
			of your entries from Part 1, in ite that number here		\$290,000.00
Part 2: De	scribe Your Vehic	eles			
			n any vehicles, whether they a also report it on Schedule G: Ex		
3. Cars, vans, tr	rucks, tractors, sport	utility vehicles,	motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 Tammie	Graham	Cas	se number (if known)	
3.1. Mak		Mercedes	Who has an interest in the property?  Check one.	Do not deduct secured cla amount of any secured cla	ims on Schedule D:
Mod	lel:	CLS550	Debtor 1 only	Creditors Who Have Claim	
Yea	r:	2012	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Арр	roximate mileage:	70,000	At least one of the debtors and another	\$18,463.00	\$18,463.00
Othe	er information:				
	2 Mercedes CL 000 miles)	S550 (approx.	Check if this is community property (see instructions)		
4.	•		Vs and other recreational vehicles, other vehicles and other recreational watercraft, fishing vessels, snowmobiles, m	•	
	✓ No ☐ Yes				
5.			u own for all of your entries from Part 2, incli or Part 2. Write that number here	_	\$18,463.00
P	art 3: Descr	ibe Your Persona	l and Household Items		
Do	you own or have a	any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	ls and furnishings appliances, furniture, I	inens, china, kitchenware		
	☐ No ☑ Yes. Describ	_	n Sets, Dining Set, Kitchen Table, Bedroo oods and Furnishings	om Set, Miscellaneous	\$2,000.00
7.	•	· · · · · · · · · · · · · · · · · · ·	o, video, stereo, and digital equipment; compute devices including cell phones, cameras, media	· · · · · · · · · · · · · · · · · · ·	
	☐ No ☑ Yes. Describ	e Refrigerator, S Miscellaneous	Stove, Washer, Dryer, 3 TVs, 2 Laptops, s Electronics	Computer, Printer,	\$2,000.00
8.		ues and figurines; paint	tings, prints, or other artwork; books, pictures, o		
	✓ No  ☐ Yes. Describ	oe			
9.	Examples: Sport		se, and other hobby equipment; bicycles, pool try tools; musical instruments	ables, golf clubs, skis;	
	☐ No ☑ Yes. Describ	e Camera			\$50.00
10.	Firearms Examples: Pistol	s, rifles, shotguns, amr	nunition, and related equipment		
	✓ No ☐ Yes. Describ	oe			
11.	Clothes Examples: Every	day clothes, furs, leath	er coats, designer wear, shoes, accessories		
	☐ No ✓ Yes. Describ	e Clothing, Shoe	es		\$450.00

Deb	tor 1 Tammie Graham	Case number (if known)	
12.	Jewelry  Examples: Everyday jewelry, c gold, silver  No	ostume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems	,
	Yes. Describe		
13.	Non-farm animals  Examples: Dogs, cats, birds, h	orses	
	☐ No ✓ Yes. Describe Multip	po Dog	\$100.00
14.	Any other personal and hous	ehold items you did not already list, including any health aids you	
	✓ No  Yes. Give specific information		
15.	Add the dollar value of all of y attached for Part 3. Write the	rour entries from Part 3, including any entries for pages you have number here	\$4,600.00
P	art 4: Describe Your F	inancial Assets	
Do	you own or have any legal or e	quitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in petition	your wallet, in your home, in a safe deposit box, and on hand when you file your	
	☐ No ☑ Yes	Cash:	\$100.00
17.	Deposits of money  Examples: Checking, savings, brokerage houses, institution, list each		
	☐ No ☑ Yes	Institution name:	
	17.1. Checking account	Checking Account #0249 BBVA Compass, Inc. 15 South 20th Street Birmington, AL 35233	\$2,000.00
	17.2. Checking account	Savings Account #5423 BBVA Compass, Inc. 15 South 20th Street Birmingham, AL 35233	\$15,000.00
18.	<b>☑</b> No	icly traded stocks nent accounts with brokerage firms, money market accounts titution or issuer name:	

Deb	tor 1 Tammie Graha	am	Case number (if known)	
19.	Non-publicly traded stoo an interest in an LLC, pa		orporated and unincorporated businesses, including inture	
	✓ No  Yes. Give specific information about them	. Name of entity:	% of ownership:	
20.	Negotiable instruments in	rate bonds and other no nolude personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	✓ No  Yes. Give specific information about them	. Issuer name:		
21.	Retirement or pension a Examples: Interests in IR profit-sharing	RA, ERISA, Keogh, 401(	x), 403(b), thrift savings accounts, or other pension or	
	No ✓ Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:	401(k)	Unknown
		Retirement account:	Retirement Account ~ State of Texas Employee Retirement System	\$60,000.00
22.		deposits you have made	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications	
	<b>☑</b> No	l	official and a second of the state of	
23	Yes		stitution name or individual: ment of money to you, either for life or for a number of years)	
25.	No Yes			
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5		a qualified ABLE program, or under a qualified state tuition program.	
	_		description. Separately file the records of any interests. 11 U.S.C. § 521	(c)
25.	Trusts, equitable or future powers exercisable for		y (other than anything listed in line 1), and rights or	
	✓ No ✓ Yes. Give specific information about the	em		
26.			s, and other intellectual property; ceeds from royalties and licensing agreements	
	<ul><li>✓ No</li><li>Yes. Give specific information about the</li></ul>	em		
27.			pibles cooperative association holdings, liquor licenses, professional licenses	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about the</li></ul>	em		

Deb	tor 1 <u>Tamı</u>	mie Graham		Case number (if k	nown)	
Mor	ney or property	y owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds o	owed to you				
	about ther	e specific informati m, including wheth dy filed the returns ux years	er		Federal State: Local:	:
29.	•		n alimony, spousal support	child support, maintenance, divorce settle	ement, property	/ settlement
	✓ No ☐ Yes. Give	e specific information	on	Alim	ony:	
	Ь	·			itenance:	
				Supp	oort:	
				Divo	rce settlement:	
				Prop	erty settlemen	<u> </u>
31.	✓ No ☐ Yes. Give	e specific informationsurance policies	on	oans you made to someone else		
	✓ No  Yes. Nam company	ealth, disability, or leading the insurance of each policy salue		gs account (HSA); credit, homeowner's, or Beneficiary:		rrender or refund value:
32.	If you are the l	beneficiary of a livi	due you from someone wing trust, expect proceeds fuse someone has died	who has died from a life insurance policy, or are currently	,	
	✓ No ☐ Yes. Give	e specific information	on			
33.	_	•	rhether or not you have file ent disputes, insurance clai	ed a lawsuit or made a demand for paynes, or rights to sue	nent	
	✓ No ☐ Yes. Des	cribe each claim				
34.	Other conting	•	ated claims of every natur	e, including counterclaims of the debtor	· and	
	✓ No ☐ Yes. Des	cribe each claim				
35.	Any financial	assets you did no	ot already list			
	✓ No ☐ Yes. Give	e specific information	on			
36.		r value of all of yo		cluding any entries for pages you have	] د	\$77,100.00

Debt	tor 1	Tammie Graham C	ase number (if kno	own)
Pa	art 5:	Describe Any Business-Related Property You Own or Have	an Interest In.	List any real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related prope	erty?	
		. Go to Part 6. s. Go to line 38.		
				Current value of the portion you own? Do not deduct secured
38.	Accou	nts receivable or commissions you already earned		claims or exemptions.
	✓ No	s. Describe		
39.		equipment, furnishings, and supplies  les: Business-related computers, software, modems, printers, copiers, fax madesks, chairs, electronic devices	chines, rugs, teleph	hones,
	✓ No ☐ Yes	s. Describe		
40.	Machir	nery, fixtures, equipment, supplies you use in business, and tools of your	trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ory		
	✓ No ☐ Yes	s. Describe		
42.	Interes	ts in partnerships or joint ventures		
	✓ No	s. Describe Name of entity:	% of ov	wnership:
43.	Custon	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	s. Do your lists include personally identifiable information (as defined in 1  No Yes. Describe	11 U.S.C. § 101(41)	A))?
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
		e dollar value of all of your entries from Part 5, including any entries for ped for Part 5. Write that number here		→ \$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related Prope If you own or have an interest in farmland, list it in Part 1.	erty You Own o	or Have an Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fi	shing-related prop	perty?
	_	. Go to Part 7. s. Go to line 47.		

Deb	or 1	Tammie Graham	Case number (if known)	
47	Farm a	simala		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm an	nimais es: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Crops	either growing or harvested		
	_	. Give specific rmation		
49.	Farm ar	nd fishing equipment, implements, machinery, fixtures, and tools of tr	ade	
	☑ No □ Yes			
50.	Farm ar	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes			
51.	Any far	m- and commercial fishing-related property you did not already list		
		. Give specific rmation		
52.		dollar value of all of your entries from Part 6, including any entries for Part 6. Write that number here		\$0.00
Pa		Describe All Property You Own or Have an Interest in Th		
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership		
	□ No			
	_	. Give specific information.		<b>*</b>
	Во	oks		\$150.00
54.	Add the	dollar value of all of your entries from Part 7. Write that number here	<b>-</b>	\$150.00

Debtor 1	Tammie Graham	Case nu	ımber (if known)		
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	: Total real estate, line 2			·	\$290,000.00
56. Part 2	: Total vehicles, line 5	\$18,463.00			
57. Part 3	: Total personal and household items, line 15	\$4,600.00			
58. Part 4	: Total financial assets, line 36	\$77,100.00			
59. Part 5	: Total business-related property, line 45	\$0.00			
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	: Total other property not listed, line 54	+\$150.00			
62. Total	personal property. Add lines 56 through 61	\$100,313.00	Copy personal property total	+	\$100,313.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62.				\$390,313.00

Fill in this in	formation to identify you	r case:				
Debtor 1	Tammie	Graham				
Daktano	First Name Middle Na	me Last Name				
Debtor 2 (Spouse, if filing)	First Name Middle Na	me Last Name				
United States Ba	ankruptcy Court for the: <b>NORTH</b>	IERN DISTRICT OF 1	ΓΕΧΑ	AS	☐ Check if this is an	
Case number					amended filing	
(if known)						
Official Form		Claim as Evern	.4		0.4	4/40
Schedule C	: The Property You (	Jiaim as Exemp	π		U <sup>2</sup>	4/16
Using the property space is needed, f	you listed on Schedule A/B: Pro	operty (Official Form 106	6A/B)	as your source, list t	responsible for supplying correct informati he property that you claim as exempt. If meessary. On the top of any additional page	nore
is to state a spec exempted up to the receive certain be exemption of 100 property is determined.	ific dollar amount as exempt. he amount of any applicable st enefits, and tax-exempt retirem % of fair market value under a mined to exceed that amount, y	Alternatively, you may atutory limit. Some extent funds-may be unleasy that limits the exe your exemption would	clair cemp imite mpti	n the full fair marke tionssuch as those d in dollar amount. on to a particular do	e for health aids, rights to However, if you claim an Ilar amount and the value of the	
Part 1: Ide	entify the Property You C	laim as Exempt				
1. Which set of	exemptions are you claiming?	Check one only,	even	if your spouse is filin	g with you.	
	claiming state and federal nonbackatining federal exemptions. 12		11 U.	S.C. § 522(b)(3)		
_	perty you list on Schedule A/B		nnt f	ill in the information	, below	
		•	•			
-	of the property and line on at lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief description:		\$290,000.00	$\overline{\mathbf{Q}}$	\$69,724.00	Tex. Prop. Code § 43.002	
614 Dover Heig	hts Trl, Mansfield, TX			100% of fair market		
76063 Legal Description	on:			value, up to any applicable statutory		
•	οπ. ΓS ADDITION, Block 2, Lot 8	3		limit		
	ant County, Texas					
Line from Schedul	le A/B: <b>1.1</b>					
Brief description:	CI CEE0 (annual 70 000	\$18,463.00		\$0.00	Tex. Prop. Code §§ 42.001(a),	
miles)	CLS550 (approx. 70,000			100% of fair market value, up to any	42.002(a)(9)	
Line from Schedul	le A/B:			applicable statutory limit		
-	ming a homestead exemption of djustment on 4/01/19 and every s			ed on or after the dat	e of adjustment.)	
✓ No ☐ Yes. Di	d you acquire the property cover	ed by the exemption wit	hin 1	215 days before you	filed this case?	

Debtor 1 Tammie Graham		Case numbe	r (if known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:  2 Living Room Sets, Dining Set, Kitchen Table, Bedroom Set, Miscellaneous Household Goods and Furnishings Line from Schedule A/B: 6	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: Refrigerator, Stove, Washer, Dryer, 3 TVs 2 Laptops, Computer, Printer, Miscellaneous Electronics Line from Schedule A/B: 7	, \$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description:  Camera  Line from Schedule A/B: 9	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(8)
Brief description: Clothing, Shoes Line from Schedule A/B:11	\$450.00	\$450.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)
Brief description:  Multipoo Dog  Line from Schedule A/B:13	<u>\$100.00</u>	\$100.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)
Brief description:  Cash  Line from Schedule A/B:16	\$100.00	\$100.00  100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.001(b)(1)
Brief description: Checking Account #0249 BBVA Compass, Inc. 15 South 20th Street Birmington, AL 35233 Line from Schedule A/B:17.1	\$2,000.00	\$2,000.00  100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.001(b)(1)
Brief description: Savings Account #5423 BBVA Compass, Inc. 15 South 20th Street Birmingham, AL 35233 Line from Schedule A/B:17.2	\$15,000.00	\$15,000.00  100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.001(b)(1)

Debtor 1	Tammie Graham			Case number	r (if known)		
Part 2:	Additional Page	additional Page					
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	the portion you exemption you claim		Specific laws that allow exemption		
		Copy the value from Schedule A/B		eck only one box for h exemption			
State of To System	ption: nt Account ~ exas Employee Retirement chedule A/B:21	\$60,000.00		\$60,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)		
Brief descrip 401(k) Line from So	ption: chedule A/B: 21	Unknown		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)		
Brief descrip Books Line from So	ption: chedule A/B: <b>53</b>	\$150.00		\$150.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(4)		

Fill in this inf	ormation to	idontify	vour case					
Debtor 1	Tammie	luciting	your case	Graham				
Debior	First Name	Midd	lle Name	Last Name				
Debtor 2 (Spouse, if filing)	Firet Name	Midd	lle Name	Last Name				
	nkruptcy Court	for the: NO	RTHERN I	DISTRICT OF TEXA	<u>\s</u>			
Case number (if known)							Check if this is amended filing	
Official Form	106D					J	amenaea min	9
		s Who H	lave Cla	aims Secured	bv Pro	pertv		12/15
correct informatio On the top of any  1. Do any credit  No. Che Yes. Fill  Part 1: Lis  2. List all securciaim, list the creditor has a much as poss creditor's nam	and it more spanditional page tors have claim ck this box and in all of the infect All Secure ed claims. If a creditor separa particular claim ible, list the claims.	ms secured d submit this formation below a creditor has ately for each m, list the other aims in alpha	by your proform to the low.  s more than a claim. If mer creditors abetical orde	e Additional Page, file and case number (if keeperty?  court with your other some secured one than one	Colur Amou Do no	mber the entr	ly responsible for supies, and attach it to this hing else to report on the Column B Value of collateral that supports this claim	is form.
2.1			secures the			\$29,270.00	\$18,463.00	\$10,807.00
Ally Financial Creditor's name ATTN: Bankrup Number Street PO Box 380901	tcy Dept.			edes CLS550  Ite you file, the claim	ı <b>is</b> : Check	all that apply.		
Bloomington	MN 5543	38	Unliquid					
City Who owes the del	State ZIP Co		Disputed					
Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a community	Debtor 2 only the debtors an	    d another	☐ An agree ☐ Statutory ☐ Judgme	en. Check all that appearent you made (suc y lien (such as tax lier nt lien from a lawsuit acluding a right to offs obile	h as mortga n, mechanio		l car Ioan)	
Date debt was inc	urred <u>11/20</u>	)15l	Last 4 digits	s of account number	6 5	5 8 2		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$29,270.00

Debtor 1 Tammie Graham		Case number (if known)			
Additional Page Part 1: After listing any entries on sequentially from the previous		Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Specialized Loan Servicing LLC Creditor's name ATTN: Bankruptcy Pro Number Street PO Box 636005	Describe the property that secures the claim: 614 Dover Heights Trail, Mansfield, TX 76063	\$220,276.00	\$290,000.00		
Littleton CO 80163-6005 City State ZIP Code  Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another □ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Mortgage	mortgage or secured	car loan)		
Date debt was incurred 06/2007	Last 4 digits of account number	2 5 2 9			

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$220,276.00

\$249,546.00

				•		
Fill in this inf	ormation to i	dentify your c	ase:			
Debtor 1	Tammie		Graham	]		
Dobtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court fo	r the: <b>NORTHER</b>	N DISTRICT OF TEXAS			
Case number				_	☐ Check if this i	
(if known)			_	_	amended filin	
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Have	e Unsecured Claims			12/15
Do not include an If more space is not to this page. On the	y creditors with needed, copy the the top of any ad	partially secured Part you need, fi ditional pages, w	and on Schedule G: Executory Co claims that are listed in Schedule Ill it out, number the entries in the rrite your name and case number secured Claims	D: Creditors Who I boxes on the left.	Hold Claims Sec	ured by Property.
	tors have priorit	y unsecured clair	ns against you?			
	- '	y anocourca olan	no agamot you.			
✓ No. Got	IO Fait 2.					
claim. For ea show both prid more space is	ch claim listed, ic ority and nonprior	lentify what type of ity amounts. As m ity unsecured clair	creditor has more than one priority of claim it is. If a claim has both prior nuch as possible, list the claims in a ms, fill out the Continuation Page of	ity and nonpriority ar Iphabetical order acc	nounts, list that cl ording to the cred	aim here and ditor's name. If
(For an explai	nation of each typ	e of claim, see the	e instructions for this form in the inst	ruction booklet.		
				Total claim	Priority	Nonpriority
					amount	amount
2.1					_	
Driority Craditaria Nam			Last 4 digits of account number			
Priority Creditor's Nam	ie		When was the debt incurred?		_	
Number Street					<del>_</del>	
			As of the date you file, the claim	is: Check all that ap	pply.	
			Contingent Unliquidated			
		717.0	Disputed			
City	State  debt? Check	ZIP Code	Towns of BRIGRITY owns a sum of all			
Who incurred the ☐ Debtor 1 only	debt? Check	one.	Type of PRIORITY unsecured cla	aim:		
Debtor 2 only			Domestic support obligations  Taxes and certain other debts	you owe the governr	ment	
Debtor 1 and D	•		Claims for death or personal in			
<b>—</b>	the debtors and		intoxicated	• •		
_	claim is for a cor	nmunity debt	Other. Specify			
Is the claim subje   ☐ No	ct to offset?					
Yes						

Debtor 1	Tammie Graham	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
□ N □ Y  4. List al If a cree type of	es  I of your nonpriority unsecured claims editor has more than one nonpriority unse f claim it is. Do not list claims already inc	In the alphabetical order of the creditor who holds each claim.  Submit this form to the court with your other schedules.  In the alphabetical order of the creditor who holds each claim.  Sourced claim, list the creditor separately for each claim. For each claim listed, identify what sluded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.  Total claims	n
Nonpriority Cr ATTN: Fit Number 800 W. Je  Kirksville City Who incurr Debtor Debtor Debtor At least Check	State ZIP Code red the debt? Check one. 1 only	\$1,479  Last 4 digits of account number 8 6 5 6  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Loan	9.00
Nonpriority Cr ATTN: Ba Number PO Box 64  Sioux Fall City Who incurr Debtor Debtor At least Check	Is SD 57117 State ZIP Code Check one. 1 only	Stat 4 digits of account number 0 9 4 0  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	6.00

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$1,315.00
Applied Bank	Last 4 digits of account number 0 9 6 1	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 10/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
2200 Concord Pike, Ste. 102	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Wilmington DE 19803		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?  No		
✓ No ☐ Yes		
4.4		\$936.00
AWA Collections	Last 4 digits of account number	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
1045 W. Katella Ave., #230	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	□ Unliquidated □ Disputed	
Orange CA 92867		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	☑ Other. Specify	
Check if this claim is for a community debt	Collecting for American Airlines	
Is the claim subject to offset?  ✓ No		
Yes		
4.5		\$1,404.00
Bloomingdales / DSNB Nonpriority Creditor's Name	Last 4 digits of account number6391	
ATTN: Bankruptcy Dept.	When was the debt incurred? 11/2012	
Number Street 9111 Duke Blvd.	As of the date you file, the claim is: Check all that apply.	
3111 Duke Bivu.	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Mason         OH         45040           City         State         ZIP Code	Turns of MONDRIORITY unreserved alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Olialys Acci	
No No		
Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$730.00
Capital 1 / Sony CC	Last 4 digits of account number 2 9 8 4	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 30285	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Salt Lake City UT 84130 City State ZIP Code	Time of NONDDIODITY impossing delaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.7		\$6,518.00
Capital One Bank USA NA	Last 4 digits of account number8820_	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 05/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 30281	☐ Contingent ☐ Unliquidated ☐ U	
0 1/1 1 0'' 1/ <del>T</del> 0//00	Disputed	
Salt Lake City UT 84130 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	5 Credit Card Accts	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.8		¢407.00
CBNA / Best Buy	Last 4 digits of account number 3 7 9 4	\$407.00
Nonpriority Creditor's Name	Last 4 digits of account number 3 7 9 4  When was the debt incurred? 08/2007	
ATTN: Bankruptcy Dept.  Number Street	As of the date you file, the claim is: Check all that apply.	
50 Northwest Point Road	_ Contingent	
	Unliquidated	
Elk Grove Village IL 60007	Disputed	
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
Is the claim subject to offset?	Sieult Gaid	
✓ No		
Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.9		\$845.00
CBNA / Tractor Supply	Last 4 digits of account number 6 4 4 3	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 06/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6497	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
<del></del>	Disputed	
Sioux Falls         SD         57117           City         State         ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?	-	
✓ No Yes		
4.10		\$740.00
CCS/First Savings Bank	Last 4 digits of account number0892_	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 07/2008	
Number Street PO Box 5019	As of the date you file, the claim is: Check all that apply.	
FO BOX 3019		
	Disputed	
Sioux Falls SD 57117-5019 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.11		\$1,175.00
Citibank / CBNA	Last 4 digits of account number 2 0 0 0	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 01/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6497	☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Sioux Falls SD 57117 City State ZIP Code	— (NONDRIGHTY )	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	g	
<b>☑</b> No		
☐ Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$4,912.00
Citicards / CBNA	_ Last 4 digits of account number 8 4 4 2	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 09/2015	
Number Street PO Box 6241	As of the date you file, the claim is: Check all that apply.	
PO BOX 6241	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
0: 5 !! 00 57447	Disputed	
Sioux Falls SD 57117 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
4.13		\$1,030.00
Comenity Bank / LNBRYANT Nonpriority Creditor's Name	Last 4 digits of account number 9 0 3 5	
ATTN: Bankruptcy Dept.	When was the debt incurred? 01/2014	
Number Street PO Box 182789	As of the date you file, the claim is: Check all that apply.  Contingent	
	Unliquidated	
Columbus OH 43218	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 1 only  Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?  ✓ No		
Yes		
4.14		<b>\$4.054.00</b>
Comenity Bank / OVERSTOCK	Last 4 digits of account number 6 1 0 2	\$1,851.00
Nonpriority Creditor's Name	Last 4 digits of account number 6 1 0 2  When was the debt incurred? 11/2015	
ATTN: Bankruptcy Notice  Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182120	_ ☐ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Columbus OH 43218		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	onarye noot	
✓ No		
Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.15		\$505.00
Comenity Bank / PIER 1	Last 4 digits of account number 8 4 3 8	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 04/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182789	Contingent	
	☐ Unliquidated ☐ Disputed	
Columbus OH 43218		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
ш	Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?  ✓ No  ✓ Yes		
4.16		\$721.00
Comenity Bank / TORRID	Last 4 digits of account number6000	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 03/2014	
Number Street PO Box 182789	As of the date you file, the claim is: Check all that apply.	
FO BOX 102709	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	☐ Unliquidated ☐ Disputed	
Columbus         OH         43218           City         State         ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Charge Acct	
✓ No		
Yes		
4.17		\$2,237.00
Comenity Bank / WAYFAIR	Last 4 digits of account number3222	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 04/2016	
Number Street PO Box 182789	As of the date you file, the claim is: Check all that apply.	
FO BOX 102709	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Columbus         OH         43218           City         State         ZIP Code	— Taras of NONDRIORITY and a control of the	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Charge Acct	
No		
Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.18		\$417.00
Comenity Capital Bank / HSN	Last 4 digits of account number2517	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 02/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182120	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Columbus OH 43218	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?  ☑ No ☐ Yes		
4.19		\$3,285.00
Credit First NA	Last 4 digits of account number 1 7 0 3	Ψ3,203.00
Nonpriority Creditor's Name	When was the debt incurred? 03/2015	
ATTN: Bankruptcy Dept.  Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 81315	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Cleveland OH 44181		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	<ul><li>✓ Other. Specify</li><li>2 Charge Accts ~ Bosch &amp; Firestone</li></ul>	
Is the claim subject to offset?	Ç	
No You		
Yes		
4.20		\$1,954.00
DSNB Macy's CC	Last 4 digits of account number6480	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 11/2012	
Number Street PO Box 8218	As of the date you file, the claim is: Check all that apply.	
FO BOX 0210	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Uniquidated ☐ Uniquida	
Manage OH 45040	Disputed	
Mason         OH         45040           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$50.00
Enhanced Recovery Systems	Last 4 digits of account number 0 6 4 9	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 12/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 57547	_ Contingent	
	☐ Unliquidated ☐ Disputed	
JacksonvilleFL32241CityStateZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Collecting for Charter Communications	
Is the claim subject to offset?	Confecting for Charter Communications	
✓ No ☐ Yes		
4.22		\$308,507.00
Fed Loan Servicing Nonpriority Creditor's Name	_ Last 4 digits of account number 0 0 0 3	
ATTN: Bankruptcy Dept.	When was the debt incurred? 04/2015	
Number Street PO Box 69184	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>         □ Contingent     </li> </ul>	
	Unliquidated	
Harrisburg PA 17106	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	✓ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
No You		
Yes		
4.23		\$461.00
First Savings Credit Card	Last 4 digits of account number 0 8 9 2	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 07/31/2008	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 5019	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Sioux Falls SD 57117-5019		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	2 Credit Card Accts	
No		
Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.24		\$1,520.00
FNCC	Last 4 digits of account number 9 5 5 9	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 01/05/2006	
Number Street	As of the date you file, the claim is: Check all that apply.	
500 East 60th St., North	_ ☐ Contingent ☐ Unliquidated	
	☐ Unliquidated ☐ Disputed	
Sioux Falls SD 57104 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
4.25		\$1,963.00
Kohls / Capone Nonpriority Creditor's Name	Last 4 digits of account number 0 4 4 3	
ATTN: Bankruptcy Dept.	When was the debt incurred? 06/2013	
Number Street N56 W 17000 Ridgewood Dr.	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>         □ Contingent     </li> </ul>	
	Unliquidated	
Menomonee Falls WI 53051	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Charge Acct	
✓ No		
Yes		
4.26		\$636.00
LVNV Funding LLC	Last 4 digits of account number 7 9 9 9	
Nonpriority Creditor's Name C/O Resurgent Capital Servs	When was the debt incurred? 01/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
ATTN: Bankruptcy Dept.	Contingent Unliquidated	
PO Box 10497	— ☐ Disputed	
Greenville         SC         29603           City         State         ZIP Code	Type of NONDRIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
<ul><li>✓ Debtor 1 only</li><li>✓ Debtor 2 only</li></ul>	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for Credit One Bank NA	
Is the claim subject to offset?		
☑ No ☐ Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.27		\$917.00
Merrick Bank	Last 4 digits of account number 0 3 7 6	•
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 11/2007	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 9201	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Old Bethpage NY 11804		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
4.28		\$3,044.00
Nordstrom FSB	Last 4 digits of account number 7 5 5 2	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 02/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6555	Contingent	
	Unliquidated Disputed	
Englewood CO 80185	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Credit Card	
No		
Yes		
4.29		¢474 E7
O'Connor & Associates	Last 4 digits of account number 1 5 6 2	\$171.57
Nonpriority Creditor's Name	Last 4 digits of account number1562_ When was the debt incurred?	
ATTN: Bankruptcy Dept.  Number Street	As of the date you file, the claim is: Check all that apply.	
2200 N. Loop West, Ste. 200	_ ☐ Contingent	
	Unliquidated	
Houston TX 77018	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Property Tax Loan	
Is the claim subject to offset?		
✓ No □ Yes		
1 1 100		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.30		\$21,493.50
Ovation Services, LLC	_ Last 4 digits of account number _ 1_ 0_ 1_ 2_	· ,
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
8401 Datapoint Dr., Ste. 1000	□ Contingent     □ Unliquidated	
Con Autonia TV 70000	Disputed	
San Antonio         TX         78229           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Tax Loan	
Is the claim subject to offset?		
☑ No □ Yes		
4.31		\$1,061.00
Synchrony Bank / Amazon Nonpriority Creditor's Name	Last 4 digits of account number 2 5 4 8	
ATTN: Bankruptcy Dept.	When was the debt incurred? 12/2014	
Number Street PO Box 965015	As of the date you file, the claim is: Check all that apply.  Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	☐ Student loans	
Debtor 1 only  Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt  Is the claim subject to offset?	Charge Acct	
No		
Yes		
4.32		\$1,348.00
Synchrony Bank / JCP	Last 4 digits of account number 6 8 7 6	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 05/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965007	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
0.1 .1	Disputed	
Orlando         FL         32896           City         State         ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Charge Acct	
☐ Check if this claim is for a community debt  Is the claim subject to offset?  No		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.33		\$2,257.00
Synchrony Bank / Lowes	Last 4 digits of account number 0 2 3 0	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 12/2015	
Number Street PO Box 965005	As of the date you file, the claim is: Check all that apply.	
го вох 903003	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  ☐ Debtor 1 only	Student loans	
Debtor 1 only  Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	<ul><li>✓ Other. Specify</li><li>2 Charge Accts</li></ul>	
Is the claim subject to offset?	2 Charge Accis	
✓ No ☐ Yes		
4.34		\$2,565.00
Nonpriority Creditor's Name	Last 4 digits of account number 0 9 9 4	
ATTN: Bankruptcy Dept.  Number Street	When was the debt incurred? 07/2016  As of the date you file, the claim is: Check all that apply.	
PO Box 965005	_ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	2 Charge Accts	
Is the claim subject to offset?		
☑ No □ Yes		
4.35		\$2,659.00
Synchrony Bk / Sams Club Nonpriority Creditor's Name	Last 4 digits of account number1949	
ATTN: Bankruptcy Dept.  Number Street	When was the debt incurred? 03/2014  As of the date you file, the claim is: Check all that apply.	
PO Box 965005	Contingent	
	☐ Unliquidated ☐ Disputed	
Orlando FL 32896		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.36		\$1,059.00
Synchrony Bk / TJX	Last 4 digits of account number 4 6 6 0	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 06/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965015	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Orlando         FL         32896           City         State         ZIP Code		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Charge Acct	
✓ No  Yes		
4.37		\$3,492.00
Synchrony Bk / Walmart	Last 4 digits of account number 0 3 7 6	ψ3,492.00
Nonpriority Creditor's Name	When was the debt incurred? 07/2013	
ATTN: Bankruptcy Dept.  Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965024	_ ☐ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	☐ Student loans	
Debtor 1 only  Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Charge Acct	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.38		\$2,622.00
TD Bank USA / Target CC	Last 4 digits of account number	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 08/2007	
Number Street PO Box 673	As of the date you file, the claim is: Check all that apply.	
FO BOX 073	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	Disputed	
Minneapolis MN 55440 City State ZIP Code	Turns of NONDRIGHTY unaccounted alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	ondigo Addi	
No No		
☐ Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.39		\$353.00
THD / CBNA	Last 4 digits of account number 1 3 9 1	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 01/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6497	□ Contingent     □ Unliquidated	
Ciarry Falls CD 57447	Disputed	
Sioux Falls         SD         57117           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?  ✓ No		
Yes		
4.40		£429.00
The Home Depot	Last 4 digits of account number	\$428.00
Nonpriority Creditor's Name	When was the debt incurred?	
ATTN: Bankruptcy Dept.  Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 790328	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
St. Louis MO 63179		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	· ·	
No You		
Yes		
4.41		\$0.00
Us Dep Ed	Last 4 digits of account number6561_	
Nonpriority Creditor's Name Po Box 5609	When was the debt incurred? <u>05/17/2010</u>	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Greenville TX 75403	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Educational	
Is the claim subject to offset?  ✓ No		
Yes		

Debtor 1 Tammie Graham	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	
Virtuoso Sourcing Group  Nonpriority Creditor's Name  ATTN: Bankruptcy Dept.  Number Street  4500 E. Cherry Creek South Dr.,  Ste. 500	Last 4 digits of account number 7 9 6 1  When was the debt incurred? 12/2018  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
Denver City State ZIP Code Who incurred the debt? Check one.  ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Collecting for Sprint	

Debtor 1	Tammie Graf	nam				Case	numb	er (if	know	n)			
Part 3:	List Others	s to B	e Notified Ab	out a Debt That \	You Already	/ Lis	sted						
For ex credite debts	cample, if a collector or in Parts 1 or 2	ction ag , then I n Parts	gency is trying t ist the collection 1 or 2, list the a	otified about your ba o collect from you fo n agency here. Simi dditional creditors h omit this page.	or a debt you d larly, if you ha	owe ive n	to son nore th	néon han c	e else ne cr	e, list t editor	he orig	inal / of the	
	merica Mortga	ge		On which entry	in Part 1 or F	art 2	did y	ou li	st the	origiı	nal cred	litor?	
Name ATTN: Ba	ankruptcy Dept	i <b>.</b>		Line of	(Check one):	П	Part 1	1: Cre	editors	with I	Priority l	Jnsecured	Claims
Number	Street arese Circle			Mortgage	, ,		Part 2	2: Cre	editors	with I	Nonprio	rity Unsecu	ured Claims
Tampa City		FL State	<b>33634</b> ZIP Code	— Last 4 digits of	account num	ber		_8_	8	3			
Capital O	ne			On which entry	in Part 1 or F	art 2	did y	ou li	st the	origii	nal cred	litor?	
ATTN: Ba	ankruptcy Dept Street 0253	t <b>.</b>		Line of Credit Card	(Check one):						•		l Claims ured Claims
Salt Lake	City	<b>UT</b> State	<b>84130</b> ZIP Code	—— Last 4 digits of	account num	ber	9	_4	_3	0_			
	ot. of Education	1		On which entry	in Part 1 or F	art 2	did y	ou li	st the	origii	nal cred	litor?	
Name ATTN: AC Number PO Box 70	Street			Line of Educational	(Check one):						•		l Claims ured Claims
Utica City		NY State	<b>13504</b> ZIP Code	—— Last 4 digits of	account num	ber	_6_	_5_	<u>6</u>	1			
	ommunication	s		On which entry	in Part 1 or F	art 2	did y	ou li	st the	origii	nal cred	litor?	
Number	ankruptcy Dept Street tic St., 10th Flo			Lineof Acct to Collect Enhanced Re	_								l Claims ured Claims
Stamford City		CT State	<b>06901</b> ZIP Code	—— Last 4 digits of	account num	ber	_						
	Bank / CLMEN	IRLD		On which entry	in Part 1 or F	art 2	did y	ou li	st the	origii	nal cred	litor?	
Name ATTN: Ba Number PO Box 18	ankruptcy Dept Street 82789	i.		Line of Charge Acct	(Check one):						•		l Claims ured Claims
Columbus	S	ОН	43218	Last 4 digits of	account num	ber	_5_	_6_	_8_	2			
City		State	ZIP Code										

Debtor 1	Tammie Graham		Case number (if known)
Part 3:	List Others to B	e Notified Ab	out a Debt That You Already Listed Continuation Page
	Bank / MYPLACEWI	)S	On which entry in Part 1 or Part 2 did you list the original creditor?
Name ATTN: Ba	ankruptcy Notice		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Street		Charge Acct Part 2: Creditors with Nonpriority Unsecured Claims
FO BOX 10	02120		
0-1	- 011	40040	Last 4 digits of account number 0 3 5 1
Columbus	S OH State	<b>43218</b> ZIP Code	<del>_</del>
•			
	e Bank NA		On which entry in Part 1 or Part 2 did you list the original creditor?
Name ATTN: Ba	ankruptcy Dept.		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street		Acct to Collection by Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 98	8873		— LVNV Funding
			Last 4 digits of account number 7 9 9 9
Las Vegas	S NV State	<b>89193</b> ZIP Code	<del></del>
•			
	ducation / Nelnet		On which entry in Part 1 or Part 2 did you list the original creditor?
Name ATTN: Ba	ankruptcy Dept.		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street		19 Educational Accts Part 2: Creditors with Nonpriority Unsecured Claims
3015 S. Pa	arker Rd., #400		— Transferred
			— Last 4 digits of account number 1 E t c
Aurora City	CO State	<b>80014</b> ZIP Code	_
Oity	Otato	211 0000	
Internal R	evenue Service		On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 73	346		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Street		Taxes Part 2: Creditors with Nonpriority Unsecured Claims
			— Tall 2. Creditors with Nonpholity offsecured claims
			— Last 4 digits of account number 8 6 5 6
Philadelpl City	hia PA State	<b>19101</b> ZIP Code	<u> </u>
City	State	ZIF Code	
Jared Gal	leria of Jewelry		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	ng Jewelers, Inc.		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street		Ohama Asad
ATTN: Ba	ankruptcy Dept.		Part 2: Creditors with Nonpriority Unsecured Claims
375 Ghen	t Road		Last 4 digits of account number 9 9 7 9
Fairlawn	OH	44333	<u> </u>
City	State	ZIP Code	
Mercedes	-Benz Financial		On which entry in Part 1 or Part 2 did you list the original creditor?
Name			<del>_</del> ·
	ankruptcy Dept. Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Automobile Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 9			Part 2: Creditors with Nonpriority Unsecured Claims
			—— Last 4 digits of account number 6 8 5 9
Roanoke	TX	76262	
City	State	ZIP Code	

Debtor 1 Tamm	ie Graham		Case number (if known)
Part 3: List	Others to Be	Notified Ab	out a Debt That You Already Listed Continuation Page
Mercedes-Benz Finame ATTN: Bankrupto Number Street 36455 Corporate I	y Dept.		On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one):
Farmington Hills City	MI State	<b>48331</b> ZIP Code	Last 4 digits of account number <u>8</u> <u>7</u> <u>3</u> <u>9</u>
Navient Solutions Name	Inc.		On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankrupto Number Street PO Box 9500	y Dept.		Line of (Check one):
Wilkes Barre City	PA State	<b>18773</b> ZIP Code	Last 4 digits of account number <u>1</u> <u>1</u> <u>1</u> <u>1</u>
Sprint Name			On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankruptc Number Street 6480 Sprint Parkw			Line of (Check one):
Overland Park City	KS State	<b>66251</b> ZIP Code	Last 4 digits of account number
Synchrony Bank /	Belk		On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankrupto Number Street PO Box 965028	y Dept		Line of (Check one):  Charge Acct  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Orlando City	<b>FL</b> State	<b>32896</b> ZIP Code	Last 4 digits of account number 6 6 0 0
Synchrony Bk / Ro	ooms To Go		On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankruptc Number Street PO Box 965036	y Dept.		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  2 Charge Accts
Orlando City	FL State	<b>32896</b> ZIP Code	Last 4 digits of account number <u>1</u> <u>1</u> <u>8</u> <u>3</u>
Synchrony Bk / So	core Rewards	<b>S</b>	On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankruptc Number Street PO Box 965005	y Dept.		Line of (Check one):
Orlando City	FL State	<b>32896</b> ZIP Code	Last 4 digits of account number 7 4 9 6

Debtor 1 I ammi	ie Graham		Case number (if known)
Part 3: List 0	Others to B	e Notified Ab	out a Debt That You Already Listed Continuation Page
US Dept. of Educa Name ATTN: Bankruptc Number Street PO Box 5609			On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one):
Greenville City	TX State	<b>75403</b> ZIP Code	Last 4 digits of account number 6 5 6 1
Wells Fargo Ed. Fi Name ATTN: Bankruptc Number Street PO Box 5185			On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one):
Sioux Falls	SD State	<b>57117</b> ZIP Code	Last 4 digits of account number

Debtor 1	Tammie Graham	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> <b>+</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$0.00
Total claims	6f.	Student loans	6f.	Total claim \$308,507.00
from Part 2	6a.	Obligations arising out of a separation agreement or divorce	6g.	\$0.00
	og.	that you did not report as priority claims	og.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>+</b>	\$82,514.07
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$391,021.07

Fill in this inf	ormation to i	identify your case	:	
Debtor 1	Tammie First Name	Middle Name	Graham Last Name	
Daluario	riist Name	wilddie Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF TEXAS	<u>s</u>
Case number				
(if known)				
Official Form	106G			

# Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  No Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Yes  1. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  3.1 Michael Dimarco Johnson, Jr.  Name  614 Dover Heights Trail  Number Street  Mansfield  TX 76063  Schedule G, line  Specialized Loan Servicing LLC	Fill in this inf	ormation to	identify your case:		
Debtor 2 (Spouse, if filing) First Name	Debtor 1	Tammie		Graham	
Check if this is an amended filing   Check if this is an amended filing		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS  Case number (iff known)  Official Form 106H  Schedule H: Your Codebtors  12/  Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach left. Att		First Name	Middle Name	Last Name	
Case number (ff known)    Check if this is an amended filling	,		NODTUEDN D	10TD10T 0F TEV 10	
Official Form 106H  Schedule H: Your Codebtors  12/  Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (If you are filling a joint case, do not list either spouse as a codebtor.)  No Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Michael Dimarco Johnson, Jr.  Name  614 Dover Heights Trail  Name  Schedule Q, line  Schedule G, line  Schedule G, line  Schedule G, line  Schedule C, line  Schedule C, line  Schedule C, line	United States Ba	nkruptcy Court f	or the: <b>NORTHERN D</b>	ISTRICT OF TEXAS	
Schedule H: Your Codebtors  Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  No Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes  In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D(Official Form 106D), Schedule E/F, or Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt check all schedule E/F, line Schedule D, line Schedule C, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line Specialized Loan Servicing LLC					<u> </u>
Schedule H: Your Codebtors  Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  No Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D(Official Form 106D), Schedule E/F, Or	Official Form	106H			
two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fili it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)    No			lebtors		12/1:
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No. Go to line 3.  Yes. Did your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule G (Official Form 106G). Use Schedule D, Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G (official Form 106G). Use Schedule D, Schedule E/F, or Schedule E/F, or Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Specialized Loan Servicing LLC	page. On the top  1. Do you have	of any Addition	al Pages, write your na	ame and case number (	if known). Answer every question.
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?    No	2. Within the la	-	-		
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.    Column 1: Your codebtor	Yes. Did	d your spouse, fo	ormer spouse, or legal ed	quivalent live with you at	the time?
Check all schedules that apply:    Michael Dimarco Johnson, Jr.   Schedule D, line   2.2     Mansfield   TX   76063   Specialized Loan Servicing LLC	3. In Column 1, person show creditor on \$	list all of your on in line 2 again Schedule D (Offi	n as a codebtor only if in as a codebtor only if it is a codebtor only it is a codebtor only if it is a codebtor only if it is a codebtor only it is	that person is a guaran dule E/F (Official Form	tor or cosigner. Make sure you have listed the
3.1 Michael Dimarco Johnson, Jr.  Name  614 Dover Heights Trail  Number Street  Mansfield  TX 76063  Schedule D, line  2.2  Schedule E/F, line  Schedule G, line  Specialized Loan Servicing LLC	Column 1:	Your codebto	,		Column 2: The creditor to whom you owe the debt
Name 614 Dover Heights Trail Number Street  Mansfield  TX 76063  Schedule D, line 2.2  Schedule E/F, line Schedule G, line Specialized Loan Servicing LLC					Check all schedules that apply:
614 Dover Heights Trail Number Street Schedule E/F, line Schedule G, line Specialized Loan Servicing LLC		Dimarco John	son, Jr.		— ☑ Schedule D. line 2.2
Number Street Schedule E/F, line Schedule G, line Specialized Loan Servicing LLC		er Heights Tra	il		<u></u>
Mansfield TX 76063 Specialized Loan Servicing LLC					<u></u>
Manished 1X 70005					<u> </u>
	Mansfiel City	d	TX State	<b>76063</b> ZIP Code	Specialized Loan Servicing LLC

Fill in this infor	mation to identi	y vour case.				
	Tammie	y your oaco.	Craham			
Debtor 1	First Name	Middle Name	Graham Last Name		 Che	eck if this is:
Debtor 2					_	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		_	Ç
	kruptcy Court for the:	NORTHERN	DISTRICT OF T	EXAS		A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)						MM / DD / YYYY
Official Form 1	061					
Schedule I: Yo	our Income					12/15
responsible for supp include information a about your spouse. your name and case	lying correct inforn about your spouse. If more space is ne	nation. If you are If you are separeded, attach a se Answer every c	e married and not rated and your spo eparate sheet to th	filing jointl ouse is not	y, and your filing with y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
Fill in your emplinformation.	oyment		Debtor 1			Debtor 2 or non-filing spouse
If you have more job, attach a sepa with information a	arate page <b>Empl</b> about	oyment status	✓ Employed  Not employed	ed		Employed  Not employed
additional employ	yers. <b>Occu</b>	pation	Tobacco Prog	ram Coor	dinator	
Include part-time or self-employed		oyer's name	Texas Dept. of Services	f State He	alth	
Occupation may student or homer applies.	p.	oyer's address	1301 Bowen R Number Street	load, Ste.	200	Number Street
			Arlington	TX	76013	
	Нош	ong employed t	City here? 22 Yea	State	Zip Code	City State Zip Code
		0 . ,		13		
	Details About M					
Estimate monthly inconon-filing spouse unle			<ul><li>n. If you have noth</li></ul>	ing to repor	t for any line	, write \$0 in the space. Include your
If you or your non-filing you need more space,	<del>-</del> '		er, combine the info	ormation for	all employe	rs for that person on the lines below. If
				For I	Debtor 1	For Debtor 2 or non-filing spouse
	oss wages, salary, as). If not paid month			2	\$3,828.35	
3. Estimate and lis	t monthly overtime	pay.		3. +	\$0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$3,828.35	

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1 Tammie Graham		Case nur	nber (if know	vn)	
			For Debtor 1	For Debto		
	Copy line 4 here	<b>→</b> 4.	\$3,828.35			-
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$356.55			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$398.54			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$69.14			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions. Specify:	5h. <b>-</b>	¥ \$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	+ 6.	\$824.23			
7.	Calculate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$3,004.12			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	 8g.	\$0.00			
	8h. Other monthly income. Specify:	8h.	÷ \$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8l	— h. 9.	\$0.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10. e.	\$3,004.12	+	]=	\$3,004.12
11.	State all other regular contributions to the expenses that you list in					
	Include contributions from an unmarried partner, members of your house friends or relatives.	sehold, y	our dependents, you	r roommates	s, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts	that are i	not available to pay e	expenses list	ted in Sch	edule J.
	Specify:				_ 11. +	+\$0.00
12.	Add the amount in the last column of line 10 to the amount in line of income. Write that amount on the Summary of Your Assets and Liability				12.	\$3,004.12
40	if it applies.					Combined monthly income
13.	Do you expect an increase or decrease within the year after you fil	e this to	riit?			
	✓ No. None.  Yes. Explain:					

F	ill in this inform	ation to iden	ntify you	ır case:			Cha	als if this	. ia.		
	Debtor 1	Tammie First Name	Mid	dle Name	Graha Last Na				s is: ended filing lement showing	postpe	etition
	Debtor 2 (Spouse, if filing)	First Name	Mid	dle Name	Last Na	me	_	chapte	r 13 expenses a ng date:		
	United States Bankr			RTHERN DISTR				NANA / D	D / VVVV		
1	Case number		10. <u>1101</u>					MIMI / D	D / YYYY		
	(if known)	0.1									
_	ficial Form 10 chedule J: Yo		es								12/15
Be cor nar	as complete and ac rect information. If me and case numbe	ccurate as poss more space is er (if known). A	ible. If tw needed, a nswer eve	attach another sh		ng together, both an	-	-			-
		be Your Hou	senoia								
<b>1. 2.</b>	☐ No ☐ Yes	e 2. ebtor 2 live in a . Debtor 2 must	file Officia		xpenses	s for Separate House	hold of	<sup>-</sup> Debtor	2.		
۷.	Do not list Debtor	_	_	Fill out this inform		Dependent's relati Debtor 1 or Debtor		o to	Dependent's age		s dependent with you?
	Debtor 2.			•		<u>Daughter</u>			34 Years	- M	No Yes
	Do not state the de names.	ependents'				Grandson			15 Years	- <b>I</b>	No Yes
										- 🖁	No Yes
										- 뮤	No Yes
											No
3.	Do your expenses expenses of peop yourself and your	le other than		No Yes						Ш	Yes
P	art 2: Estima	te Your Ong	oing Mo	onthly Expens	es						
to ı		of a date after t	he bankrı	_	-	re using this form as supplemental Sche		-	-		e
	lude expenses paid ch assistance and h		-		-				Your expens	ses	
4.	The rental or hom Include first mortga	•	-	-					4.		\$1,361.54
	If not included in	line 4:									
	4a. Real estate ta	ixes							4a		\$0.00
	4b. Property, hom	neowner's, or ren	ter's insur	ance					4b		\$0.00
	4c. Home mainte	nance, repair, ar	nd upkeep	expenses					4c		\$0.00
	4d. Homeowner's	association or o	ondominii	ım dues					4d.		\$0.00

Debtor	1 Tammie Graham	Case number (if known)			
		Your expense	es		
5. A	dditional mortgage payments for your residence, such as home equity loans	5.	\$0.00		
6. U	tilities:				
68	a. Electricity, heat, natural gas	6a.	\$0.00		
6k	o. Water, sewer, garbage collection	6b	\$100.00		
60	Telephone, cell phone, Internet, satellite, and cable services	6c	\$50.00		
60	I. Other. Specify:	6d	\$0.00		
7. F	ood and housekeeping supplies	7.	\$150.00		
8. C	nildcare and children's education costs	8.	\$0.00		
9. C	othing, laundry, and dry cleaning	9.	\$20.00		
10. P	ersonal care products and services	10.	\$20.00		
11. M	edical and dental expenses	11.	\$0.00		
	ransportation. Include gas, maintenance, bus or train re. Do not include car payments.	12.	\$60.00		
	ntertainment, clubs, recreation, newspapers, agazines, and books	13.	\$20.00		
14. C	naritable contributions and religious donations	14.	\$0.00		
	surance. o not include insurance deducted from your pay or included in lines 4 or 20.				
	5a. Life insurance	15a.	\$0.00		
15	5b. Health insurance	 15b.	\$0.00		
15	c. Vehicle insurance	15c.	\$219.00		
15	id. Other insurance. Specify:	15d.	\$0.00		
<b>16.</b> Ta		16.			
17. In	stallment or lease payments:				
17	ra. Car payments for Vehicle 1 2012 Mercedes CLS550	17a	\$763.84		
17	b. Car payments for Vehicle 2	17b.			
17	c. Other. Specify:				
17	d. Other. Specify:				
18. Yo	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).				
	ther payments you make to support others who do not live with you.	19.			

Debtor 1 Tammie Graham		Tammie Graham	Case number (if known	)
		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify:	21. +	
22.	Calcu	late your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$2,764.38
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2. 22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$2,764.38
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,004.12
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b>	\$2,764.38
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$239.74
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your morto	. ,	
	<b>☑</b> No			
	□ `	Yes. Explain here: None.		

F	ill in this inf	ormation to i	dentify your case:			
D	ebtor 1	Tammie	M. I. II. M.	Graham		
_	alita a O	First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
Uı	nited States Ba	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF TEXAS		
	ase number				☐ Check i	if this is an
(IT	known)				amende	ed filing
<u>Of</u>	ficial Form	106Sum				
Sι	ımmary of	f Your Ass	ets and Liabilit	ies and Certain Sta	tistical Information	12/15
cor sch	rect information dedutes after ye	on. Fill out all of ou file your orig	f your schedules first; inal forms, you must fi	then complete the information	both are equally responsible for on this form. If you are filin heck the box at the top of this	g amended
Р	art 1: Su	mmarize You	ır Assets			
						Your assets Value of what you own
1.		B: Property (Offici	,	_		\$290,000.00
	1a. Copy line	e 55, Total real e	state, from Schedule A/	B		
	1b. Copy line	e 62, Total perso	nal property, from Sche	dule A/B		\$100,313.00
	1c. Copy line	e 63, Total of all <sub>l</sub>	property on Schedule A	/B		\$390,313.00
P	art 2: Su	mmarize You	ır Liabilities			
						Your liabilities Amount you owe
2.				Property (Official Form 106D) claim, at the bottom of the las	t page of Part 1 of Schedule D	\$249,546.00
3.				s (Official Form 106E/F) red claims) from line 6e of Sch	nedule E/F	\$0.00
	3b. Copy the	e total claims fron	n Part 2 (nonpriority uns	ecured claims) from line 6j of	Schedule E/F	+\$391,021.07
					Your total liabilities	\$640,567.07
P	art 3: Su	mmarize You	ır Income and Exp	enses		
4.		<i>our Incom</i> e (Office monthly i		Schedule I		\$3,004.12
5.			Official Form 106J) rom line 22c of Schedul	le J		\$2,764.38

Debtor 1		Tammie Graham (	Case number (if known)			
Р	art 4:	Answer These Questions for Administrative and Statistic	al Record	ls		
6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?				
	ш.	No. You have nothing to report on this part of the form. Check this box and sub	omit this forn	n to the court with your	other schedules.	
7.	What	kind of debt do you have?				
	Ľ	Your debts are primarily consumer debts. Consumer debts are those "incurr amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statisti	•		ersonal,	
		<b>Your debts are not primarily consumer debts.</b> You have nothing to report on his form to the court with your other schedules.	this part of	the form. Check this bo	ox and submit	
8.		the Statement of Your Current Monthly Income: Copy your total current monthly Income: Al Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	nthly income	e from	\$3,828.35	
9.	Сору	the following special categories of claims from Part 4, line 6 of Schedule	E/F:			
				Total claim		
	From	Part 4 on Schedule E/F, copy the following:				
	9a. [	Domestic support obligations. (Copy line 6a.)		\$0.00		
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)		\$0.00		
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		\$0.00		
	9d. S	Student loans. (Copy line 6f.)		\$308,507.00		
		Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	oort as	\$0.00		
	9f. [	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b>	\$0.00		

9g. Total. Add lines 9a through 9f.

\$308,507.00

Fill in this inf	formation to id	entify your case	:	
Debtor 1	Tammie		Graham	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Ba	inkruptcy Court for	the: NORTHERN D	ISTRICT OF TEXAS	_
Case number (if known)				☐ Check if this is an
(II KIIOWII)				amended filing
Official Form	106Dec			
Declaration	About an Ir	dividual Debt	or's Schedules	12/15
If two married peo	ople are filing tog	ether, both are equa	lly responsible for supplyi	ng correct information.
Vou must file this	form whenever v	ou file bankruntev s	chadulas or amandad sch	edules. Making a false statement,
concealing prope	rty, or obtaining r	noney or property by	y fraud in connection with	a bankruptcy case can result in fines up to
\$250,000, or impr	isonment for up to	o 20 years, or both.	18 U.S.C. §§ 152, 1341, 151	19, and 3571.
Sig	gn Below			
5				
Did you pay	or agree to pay so	omeone who is NO I	an attorney to help you fill	out bankruptcy forms?
<b>☑</b> No				
Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).
Under penalt		lare that I have read	the summary and schedul	les filed with this declaration and that they are
300	-			
X /s/ Tamm	nie Graham		X	
	Praham Debtor 1		Signature of Debtor 3	<u> </u>

Date 03/07/2019

MM / DD / YYYY

Date

MM / DD / YYYY

					_		
Fi	ll in this info	ormation to ider	ntify your case:	:			
De	btor 1	Tammie First Name	Middle Name	<b>Graham</b> Last Name	-		
	btor 2 bouse, if filing)	First Name	Middle Name	Last Name	-		
Un	ited States Bar	nkruptcy Court for the	e: NORTHERN D	ISTRICT OF TEXAS	_		
	se number known)				☐ Check if this is amended filing		
Off	icial Form	107					
Sta	tement o	 f Financial Af	fairs for Ind	ividuals Filing for	Bankruptcv	04/16	
		se number (if know re Details About	,	question. Status and Where You	Lived Before		
1.	What is your of Married  ✓ Not marrie	current marital statu	us?				
2.	During the last 3 years, have you lived anywhere other than where you live now?  ✓ No  ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.						
3.							
	✓ No ☐ Yes. Mak	e sure you fill out <i>Sc</i>	hedule H: Your Co	debtors (Official Form 106H).			

Part 2: Explain the Sources of Yo		Tammie Graham		Case nur	Case number (if known)			
		Explain the Sources of Y	our Income					
<ul> <li>4. Did you have any income from employre Fill in the total amount of income you recell f you are filling a joint case and you have</li> <li>No</li> <li>✓ Yes. Fill in the details.</li> </ul>		e total amount of income you rece re filing a joint case and you have	ived from all jobs and all bu	isinesses, including par	t-time activities.	alendar years?		
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions		
From January 1 of the current year until the date you filed for bankruptcy:			<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$7,657.30	☐ Wages, commissions, bonuses, tips ☐ Operating a business			
For the last calendar year:  (January 1 to December 31, 2018)		•	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$40,818.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>			
For the calendar year before that:  (January 1 to December 31,		December 31, 2017 )	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$42,153.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>			
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.							
	List eac	h source and the gross income fro	m each source separately.	Do not include income	that you listed in line 4.			
	✓ No ☐ Yes	s. Fill in the details.						

Debtor 1 Tammie Graham			Case number (if known)						
P	art 3:	List Certain Payments You Ma	ade Before `	You Filed for Ba	nkruptcy				
6.	Are eith	er Debtor 1's or Debtor 2's debts prima	arily consume	r debts?					
	□ No.	Neither Debtor 1 nor Debtor 2 has p "incurred by an individual primarily for	-			d in 11 U.S.C. § 101(8) as			
		During the 90 days before you filed for	bankruptcy, di	d you pay any credite	or a total of \$6,425*	or more?			
		No. Go to line 7.							
		Yes. List below each creditor to what total amount you paid that credit child support and alimony. A	editor. Do not i	nclude payments for	domestic support of	oligations, such as			
		* Subject to adjustment on 4/01/19 and	d every 3 years	after that for cases t	filed on or after the c	date of adjustment.			
	<b>✓</b> Yes.	Debtor 1 or Debtor 2 or both have p	rimarily consu	mer debts.					
		During the 90 days before you filed for	bankruptcy, di	d you pay any credite	or a total of \$600 or	more?			
		☐ No. Go to line 7.							
		Yes. List below each creditor to who creditor. Do not include payr Also, do not include payment	ments for dome	stic support obligatio	ns, such as child su				
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for			
	/ Financ	ial	_	\$2,291.52	\$29,270.00	_ Mortgage			
	ditor's name  Box 380	9901	12/3/2018,	1/3 & 2/3/2019		☑ Car ☐ Credit card			
Nun	nber Stre	et	_			Loan repayment			
			_			Suppliers or vendors			
	omingto		_			Other			
City		State ZIP Code							
7.	Insiders corporat agent, in	year before you filed for bankruptcy, include your relatives; any general partnions of which you are an officer, director, cluding one for a business you operate a child support and alimony.	ers; relatives o person in cont	f any general partner rol, or owner of 20%	s; partnerships of whor more of their votin	nich you are a general partner; ng securities; and any managing			
	✓ No ☐ Yes.	List all payments to an insider.							

Deb	tor 1	Tammie Graham	Case number (if known)						
8.		year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider?							
Include payments on debts guaranteed or cosigned by an insider.									
✓ No ☐ Yes. List all payments that benefited an insider.									
		1							
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosu	es						
9.	List all s	1 year before you filed for bankruptcy, were you a party in any lawsui such matters, including personal injury cases, small claims actions, divorcations, and contract disputes.	· · · · · · · · · · · · · · · · · · ·						
	✓ No ☐ Yes	s. Fill in the details.							
10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.									
	ت ا	Go to line 11. s. Fill in the information below.							
11.		90 days before you filed for bankruptcy, did any creditor, including a ts from your accounts or refuse to make a payment because you owe	the contract of the contract o						
	✓ No ☐ Yes	s. Fill in the details.							
12.		1 year before you filed for bankruptcy, was any of your property in these, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of						
	✓ No ☐ Yes	s							
Pa	art 5:	List Certain Gifts and Contributions							
13.	Within	- 2 years before you filed for bankruptcy, did you give any gifts with a t	otal value of more than \$600 per person?						
	✓ No ☐ Yes	s. Fill in the details for each gift.							
14.		2 years before you filed for bankruptcy, did you give any gifts or cont charity?	ributions with a total value of more than \$600						
	✓ No ☐ Yes	s. Fill in the details for each gift or contribution.							

Debtor 1 Tammie Graham			aham		Case number (if known)				
Part 6: List Certain Losses									
15.	15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
	✓ No ☐ Yes. Fill in the details.								
P	art 7:	List Certa	ain Pa	yments or	Transfers				
16.	anyone	you consulte	ed abou	ut seeking bar	ptcy, did you or anyone else acting hkruptcy or preparing a bankruptcy preparers, or credit counseling agence	y petition?		-	
	v Office	. Fill in the de		g	Description and value of any pro	perty transferred	Date payment or transfer was	Amount of payment	
		Pioneer Par	kway		-		made 03/01/2019	\$1,500.00	
City	ngton		TX State	<b>76013</b> ZIP Code	-				
	vningofi il or websit	rice@aol.co e address	<u>m</u>		-				
TLF Pers		ade the Paymen	nt, if Not	You	-				
17.	anyone Do not i	who promise	ed to he	elp you deal w	ptcy, did you or anyone else acting vith your creditors or to make payr you listed on line 16.			perty to	
	✓ No ☐ Yes	. Fill in the de	etails.						
18.		•	•		uptcy, did you sell, trade, or otherv se of your business or financial af		perty to anyone, ot	her than	
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).  Do not include gifts and transfers that you have already listed on this statement.						property).		
	✓ No ☐ Yes. Fill in the details.								
19.	<ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						e of which		

Debtor 1		Tammie Graham	Case number (if known)
P	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	sit Boxes, and Storage Units
20.		l year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred?	nstruments held in your name, or for your
	Include	checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptc ırities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	<b>☑</b> No	ou stored property in a storage unit or place other than your home with  . Fill in the details.	in 1 year before you filed for bankruptcy?
P	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any prin trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ı	hazardoι	nental law means any federal, state, or local statute or regulation conc is or toxic substance, wastes, or material into the air, land, soil, surfac a statutes or regulations controlling the cleanup of these substances, w	e water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		<i>us material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of w	then they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially lia	able under or in violation of an environmental
	✓ No □ Yes	. Fill in the details.	

Deb	otor 1	Tammie Graf	nam		Case number (if known)			
25.	<ul> <li>Have you notified any governmental unit of any release of hazardous material?</li> <li>✓ No</li> <li>✓ Yes. Fill in the details.</li> </ul>							
26.	Have you		in any judicia	I or administrative proceeding under a	any environmental law? Include settlements and			
	☑ No □ Yes	s. Fill in the deta	ils.					
P	art 11:	Give Detai	ls About Yo	our Business or Connections to	Any Business			
27.	Within busines	•	you filed for ba	ankruptcy, did you own a business or	have any of the following connections to any			
	<ul> <li>✓ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time</li> <li>A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> <li>A partner in a partnership</li> <li>An officer, director, or managing executive of a corporation</li> <li>An owner of at least 5% of the voting or equity securities of a corporation</li> <li>No. None of the above applies. Go to Part 12.</li> <li>✓ Yes. Check all that apply above and fill in the details below for each business.</li> </ul>							
	ntoring			Describe the nature of the business Mentoring	Employer Identification number  Do not include Social Security number or ITIN.			
		e Heights Trail		. Name of accountant or bookkeeper	EIN: 8 1 - 5 2 2 1 1 0 7			
INUII	ibei Sii	eet			Dates business existed			
Ma City	nsfield	TX State	<b>76063</b> ZIP Code		From <u>02/03/2017</u> To <u>Present</u>			
28.	all final	2 years before y notial institution s. Fill in the deta	s, creditors, o		tement to anyone about your business? Include			

Debtor 1	Tammie Graham	Ca	se number (if known)
Part 12	: Sign Below		
that answe	ers are true and correct. I unde	t of Financial Affairs and any attachments, ar rstand that making a false statement, concea nkruptcy case can result in fines up to \$250,0 i 3571.	ling property, or obtaining money or
X /s/ Tan	nmie Graham	X	
Tammie	e Graham, Debtor 1	Signature of Debtor 2	
Date _	03/07/2019	Date	
Did you at	tach additional pages to Your S	tatement of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes			
Did you pa	ay or agree to pay someone wh	o is not an attorney to help you fill out bankru	uptcy forms?
<b>√</b> No			
	lame of person		Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).

Fill in this inf	ormation to i	dentify your case	:	1	
Debtor 1	Tammie First Name	Middle Name	Graham Last Name	. ]	
Debtor 2	riistrame	Widdle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF TEXAS		
Case number (if known)					Check if this is an amended filing
Official Form	108				
Statement o	f Intention	for Individuals	Filing Under Chap	ter 7	12/15
If you are an indiv	idual filing unde	er chapter 7, you mus	t fill out this form if:		

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral			at do you intend to do with the perty that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's name:	Ally Financial		Surrender the property.  Retain the property and redeem it.		No Yes
Description of property securing debt:	2012 Mercedes CLS550		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		
Creditor's name:	Specialized Loan Servicing LLC		Surrender the property. Retain the property and redeem it.		No Yes
Description of property securing debt	614 Dover Heights Trail, Mansfield, TX 76063	ಠ	Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		

Debtor 1	Tammie Graham		Case number (if known)
Part 2:	List Your Unexpired Pe	rsonal Property Leases	
fill in the inf	ormation below. Do not list rea	l estate leases. Unexpired lease	Executory Contracts and Unexpired Leases (Official Form 106G), es are leases that are still in effect; the lease period has not ustee does not assume it. 11 U.S.C. § 365(p)(2).
Describ	pe your unexpired personal pro	perty leases	Will this lease be assumed?
None.			
Part 3:	Sign Below		
•	enalty of perjury, I declare that I property that is subject to an u	•	out any property of my estate that secures a debt and
X /s/ Tamr	mie Graham	X	
Tammie (	Graham, Debtor 1	Signature of Debtor	2
	/07/2019 // / DD / YYYY	Date MM / DD / YY	YYY -

B2030 (Form 2030) (12/15)

In re Tammie Graham

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

Case No.

		CI	napter	7
	DISCLOSURE	OF COMPENSATION OF ATTORNE	Y FOR	DEBTOR
1.	that compensation paid to me within	Fed. Bankr. P. 2016(b), I certify that I am the attonone year before the filing of the petition in bankrud on behalf of the debtor(s) in contemplation of or	ıptcy, or a	greed to be paid to me, for
	For legal services, I have agreed to	accept	\$3	,750.00
	Prior to the filing of this statement I	have received		,500.00
				,250.00
2.	The source of the compensation pa	id to me was:		
	☐ Debtor	✓ Other (specify) TLP		
3.	The source of compensation to be	paid to me is:		
	☐ Debtor	✓ Other (specify)  To be paid through Ch 13 Plan		
4.	I have not agreed to share the associates of my law firm.	above-disclosed compensation with any other per	son unles	s they are members and
		ve-disclosed compensation with another person oppy of the agreement, together with a list of the nat		
5.	In return for the above-disclosed fe	e, I have agreed to render legal service for all aspe	ects of the	e bankruptcy case, including:
	a. Analysis of the debtor's financial bankruptcy;	situation, and rendering advice to the debtor in de	etermining	whether to file a petition in
	b. Preparation and filing of any pet	tion, schedules, statements of affairs and plan whi	ich may b	e required;
	c. Representation of the debtor at	he meeting of creditors and confirmation hearing,	and any a	adjourned hearings thereof;

B2030	(Form	2030)	(12/15)
DZU3U 1	LEOIIII	20301	(12/13)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/07/2019 /s/ Dwain Downing

Date Dwain Downing
Law Office of Dwain Downing

1178 W. Pioneer Pkwy Arlington, TX 76015

Phone: (817) 860-5685 / Fax: (817) 916-8804

Bar No. 06086550

/s/ Tammie Graham

Tammie Graham

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Tammie Graham CASE NO

CHAPTER 7

# **VERIFICATION OF CREDITOR MATRIX**

knowl	The above named Debtor hereby verifies that the edge.	attached I	st of creditors is true and correct to the best of his/her
Date .	3/7/2019	Signature	/s/ Tammie Graham
			Tammie Graham

A. T. Still University ATTN: Finance/Bankrupty Dept. 800 W. Jefferson St. Kirksville, MO 63501

Ally Financial
ATTN: Bankruptcy Dept.
PO Box 380901
Bloomington, MN 55438

American Airlines CC ATTN: Bankruptcy Dept. PO Box 6403 Sioux Falls, SD 57117

Applied Bank
ATTN: Bankruptcy Dept.
2200 Concord Pike, Ste. 102
Wilmington, DE 19803

AWA Collections ATTN: Bankruptcy Dept. 1045 W. Katella Ave., #230 Orange, CA 92867

Bank of America Mortgage ATTN: Bankruptcy Dept. 4909 Savarese Circle Tampa, FL 33634

Bloomingdales / DSNB ATTN: Bankruptcy Dept. 9111 Duke Blvd. Mason, OH 45040

Capital 1 / Sony CC ATTN: Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130

Capital One ATTN: Bankruptcy Dept. PO Box 30253 Salt Lake City, UT 84130 Capital One Bank USA NA ATTN: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

CBNA / Best Buy ATTN: Bankruptcy Dept. 50 Northwest Point Road Elk Grove Village, IL 60007

CBNA / Tractor Supply ATTN: Bankruptcy Dept. PO Box 6497 Sioux Falls, SD 57117

CCS/First Savings Bank ATTN: Bankruptcy Dept. PO Box 5019 Sioux Falls, SD 57117-5019

CES / Dept. of Education ATTN: ACS PO Box 7052 Utica, NY 13504

Charter Communications ATTN: Bankruptcy Dept. 400 Atlantic St., 10th Floor Stamford, CT 06901

Citibank / CBNA ATTN: Bankruptcy Dept. PO Box 6497 Sioux Falls, SD 57117

Citicards / CBNA ATTN: Bankruptcy Dept. PO Box 6241 Sioux Falls, SD 57117

Comenity Bank / CLMEMRLD ATTN: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218 Comenity Bank / LNBRYANT ATTN: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Comenity Bank / MYPLACEWDS ATTN: Bankruptcy Notice PO Box 182120 Columbus, OH 43218

Comenity Bank / OVERSTOCK ATTN: Bankruptcy Notice PO Box 182120 Columbus, OH 43218

Comenity Bank / PIER 1 ATTN: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Comenity Bank / TORRID ATTN: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Comenity Bank / WAYFAIR ATTN: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Comenity Capital Bank / HSN ATTN: Bankruptcy Dept. PO Box 182120 Columbus, OH 43218

Credit First NA ATTN: Bankruptcy Dept. PO Box 81315 Cleveland, OH 44181

Credit One Bank NA ATTN: Bankruptcy Dept. PO Box 98873 Las Vegas, NV 89193 Dept Of Education / Nelnet ATTN: Bankruptcy Dept. 3015 S. Parker Rd., #400 Aurora, CO 80014

DSNB Macy's CC ATTN: Bankruptcy Dept. PO Box 8218 Mason, OH 45040

Enhanced Recovery Systems ATTN: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Fed Loan Servicing ATTN: Bankruptcy Dept. PO Box 69184 Harrisburg, PA 17106

First Savings Credit Card ATTN: Bankruptcy Dept. PO Box 5019 Sioux Falls, SD 57117-5019

FNCC ATTN: Bankruptcy Dept. 500 East 60th St., North Sioux Falls, SD 57104

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Jared Galleria of Jewelry aka Sterling Jewelers, Inc. ATTN: Bankruptcy Dept. 375 Ghent Road Fairlawn, OH 44333

Kohls / Capone ATTN: Bankruptcy Dept. N56 W 17000 Ridgewood Dr. Menomonee Falls, WI 53051 LVNV Funding LLC C/O Resurgent Capital Servs ATTN: Bankruptcy Dept. PO Box 10497 Greenville, SC 29603

Mercedes-Benz Financial ATTN: Bankruptcy Dept. 36455 Corporate Drive Farmington Hills, MI 48331

Mercedes-Benz Financial ATTN: Bankruptcy Dept. PO Box 961 Roanoke, TX 76262

Merrick Bank
ATTN: Bankruptcy Dept.
PO Box 9201
Old Bethpage, NY 11804

Michael Dimarco Johnson, Jr. 614 Dover Heights Trail Mansfield, TX 76063

Navient Solutions Inc. ATTN: Bankruptcy Dept. PO Box 9500 Wilkes Barre, PA 18773

Nordstrom FSB ATTN: Bankruptcy Dept. PO Box 6555 Englewood, CO 80185

O'Connor & Associates ATTN: Bankruptcy Dept. 2200 N. Loop West, Ste. 200 Houston, TX 77018

Ovation Services, LLC ATTN: Bankruptcy Dept. 8401 Datapoint Dr., Ste. 1000 San Antonio, TX 78229 Specialized Loan Servicing LLC ATTN: Bankruptcy Pro PO Box 636005 Littleton, CO 80163-6005

Sprint

ATTN: Bankruptcy 6480 Sprint Parkway, Bldg. 13 Overland Park, KS 66251

Synchrony Bank / Amazon ATTN: Bankruptcy Dept. PO Box 965015 Orlando, FL 32896

Synchrony Bank / Belk ATTN: Bankruptcy Dept PO Box 965028 Orlando, FL 32896

Synchrony Bank / JCP ATTN: Bankruptcy Dept. PO Box 965007 Orlando, FL 32896

Synchrony Bank / Lowes ATTN: Bankruptcy Dept. PO Box 965005 Orlando, FL 32896

Synchrony Bk / Old Navy ATTN: Bankruptcy Dept. PO Box 965005 Orlando, FL 32896

Synchrony Bk / Rooms To Go ATTN: Bankruptcy Dept. PO Box 965036 Orlando, FL 32896

Synchrony Bk / Sams Club ATTN: Bankruptcy Dept. PO Box 965005 Orlando, FL 32896 Synchrony Bk / Score Rewards ATTN: Bankruptcy Dept. PO Box 965005 Orlando, FL 32896

Synchrony Bk / TJX
ATTN: Bankruptcy Dept.
PO Box 965015
Orlando, FL 32896

Synchrony Bk / Walmart ATTN: Bankruptcy Dept. PO Box 965024 Orlando, FL 32896

TD Bank USA / Target CC ATTN: Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440

THD / CBNA
ATTN: Bankruptcy Dept.
PO Box 6497
Sioux Falls, SD 57117

The Home Depot ATTN: Bankruptcy Dept. PO Box 790328 St. Louis, MO 63179

Us Dep Ed Po Box 5609 Greenville, TX 75403

US Dept. of Education ATTN: Bankruptcy Dept PO Box 5609 Greenville, TX 75403

Virtuoso Sourcing Group ATTN: Bankruptcy Dept. 4500 E. Cherry Creek South Dr., Ste. 500 Denver, CO 80246 Wells Fargo Ed. Fin. Services ATTN: Bankruptcy Dept. PO Box 5185 Sioux Falls, SD 57117

			dentify your case			box only as directin Form 122A-1Su	
Debto	or 1	Tammie First Name	Middle Name	Graham Last Name	_ I.There is	no presumption of abus	se.
Debto (Spou	or 2 use, if filing)	First Name	Middle Name	Last Name	2.The calcurate of abuse	ulation to determine if a applies will be made u	presumption
		nkruptcy Court fo	r the: <b>NORTHERN D</b>	ISTRICT OF TEXAS	-	est Calculation (Official ns Test does not apply ed military service but i	now because
(if kno	number own)				later.	ed military service but i	t could apply
					☐ Check if the	his is an amended filing	9
Offic	ial Form	122A-1					
:hap	oter 7 S	tatement o	f Your Current	Monthly Income			12 <i>J</i> *
re exe	empted fron y service, c Supp) with	n a presumption omplete and file this form.	of abuse because yo	s, write your name and case ou do not have primarily cor tion from Presumption of Al ncome	sumer debts or be	ecause of qualifying	you
. W	hat is vour	marital and filing	g status? Check one of	only.			
			ımn A, lines 2-11.	,			
☑	· ·			ill out both Columns A and B,	lines 2-11		
				ou. You and your spouse ar			
	•			t legally separated. Fill out b		IR lines 2 11	
		_					sia hav vau
	dec	lare under penalt	y of perjury that you an	<ul> <li>Fill out Column A, lines 2-1 d your spouse are legally sep s that do not include evading</li> </ul>	arated under nonba	ankruptcy law that appli	es or that you
<b>b</b> a Au in	nkruptcy c ugust 31. If the result.	ase. 11 U.S.C. § the amount of yo Do not include an	§ 101(10A). For exampur monthly income various income amount more	ed from all sources, derived ole, if you are filing on Septen ied during the 6 months, add than once. For example, if I have nothing to report for any	nber 15, the 6-mont the income for all 6 both spouses own t	th period would be Mard months and divide the he same rental property	ch 1 through total by 6. Fill
					Column A  Debtor 1	Column B  Debtor 2 or non-filing spouse	
		rages, salary, tip roll deductions).	s, bonuses, overtime	, and commissions	\$3,828.35		
	<b>imony and</b> Column B is	•	yments. Do not includ	de payments from a spouse	\$0.00		
ex re yo a :	penses of y gular contrib our depende	you or your depondence outlines from an units, parents, and	roommates. Include re		\$0.00		

Deb	tor 1	Tammie Graham			c	ase number (if k	nown)	
						Column A  Debtor 1	Column B  Debtor 2 or non-filing spous	e
5.	Net inc	come from operating a busing	ess, profession, or	farm				
			Debtor 1	Debtor 2				
	Gross r deducti	receipts (before all ions)	\$0.00					
	Ordinar expens	ry and necessary operating -es	\$0.00		Сору			
		nthly income from a business, sion, or farm	\$0.00		here →	\$0.00		
6.	Net inc	come from rental and other re						
			Debtor 1	Debtor 2				
	deducti	•	\$0.00					
	Ordinar expens	ry and necessary operating - es			Сору			
		nthly income from rental or eal property	\$0.00		here →	\$0.00		
7.	Interes	t, dividends, and royalties				\$0.00		
8.	Unemp	oloyment compensation				\$0.00		
		enter the amount if you conter under the Social Security Act.						
	For	you		\$0.	00			
	For	your spouse						
9.		on or retirement income. Do no penefit under the Social Securi		ount received that		\$0.00		
10.	amount or payn or inter	e from all other sources not I  t. Do not include any benefits nents received as a victim of a national or domestic terrorism. te page and put the total below	received under the war crime, a crime	Social Security A against humanity	ct ',			
	Total a	mounts from separate pages, i	f any.		+		+	
11.	Add line	ate your total current monthles 2 through 10 for each colundd the total for Column A to the	nn.	,		\$3,828.35	+	= \$3,828.35
	men a	aa ine ioiai ioi Colulliii A io th	o lotal foi Coluitiii B	<b>.</b> .	_			Total current monthly income

Debtor 1		<u>T</u>	ammie Graham		Case number (if known)		
Ρ	art 2:		Determine Whether the Means	Test Applies to You			
12.	Calc	ulate	your current monthly income for the y	ear. Follow these steps:			
	12a.	Cop	by your total current monthly income from	line 11	Copy line 11 here -> 12a. \$3,828.35		
		Mul	Itiply by 12 (the number of months in a ye	ar).	X 12		
	12b.	The	e result is your annual income for this part	t of the form.	12b. <b>\$45,940.20</b>		
13.	Calc	ulate	the median family income that applies	to you. Follow these steps:			
	Fill in	the s	state in which you live.	Texas			
	Fill in	the i	number of people in your household.	3			
	Fill in	the i	median family income for your state and s	size of household	13. <b>\$70,548.00</b>		
			ist of applicable median income amounts as for this form. This list may also be ava				
14			ne lines compare?	, ,			
	14a.	<b>☑</b>	Line 12b is less than or equal to line 13 Go to Part 3.	. On the top of page 1, check b	ox 1, There is no presumption of abuse.		
	14b.		Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.		
Р	art 3:		Sign Below				
	D./	oiani	ag hara. I daglara undar nanalty of nariun	, that the information on this ata	tement and in any attachments is true and correct.		
	Бу	sigiiii	ig here, i declare under penalty or perjury	, that the information on this sta	tement and in any attachments is true and correct.		
			ammie Graham mie Graham, Debtor 1	<b>X</b>	ture of Debtor 2		
		Date	3/7/2019	Date	MM / DD / MAGA/		
	If y	ou ch	MM / DD / YYYY  ecked line 14a, do NOT fill out or file For	m 122A-2.	MM / DD / YYYY		

If you checked line 14b, fill out Form 122A-2 and file it with this form.